

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	6/30/01
FORMALITY REVIEW	MTB	95	5/24/01
RESPONSE FORMALITY REVIEW	8/2/01	1091	9-19-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/1/02
2	5/8/02
3	5/27/02
4	8/2/02
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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DC-619-  
 619-01  
 9-19-01